

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	KA	70591	12/23
O.I.P.E. CLASSIFIER		8	01-06-00
FORMALITY REVIEW	WMC	08221	1-14-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	8/23/03
2	8/23/03
3	8/23/03
4	8/23/03
5	8/23/03
6	8/23/03
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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